

10- R -0104

Entered 10/29/09 sb  
CL 09L0840 - LISA CARTER

**CLAIM OF: TIMOTHY K. BRAYBOY**  
10175 Hemlock Way  
Jonesboro, Georgia 30238

For damages alleged to have been sustained as a  
result of an automobile accident in a parking lot on  
May 21, 2009 at 651 14<sup>th</sup> Street, NW.

THIS ADVERSED REPORT IS  
APPROVED

BY: \_\_\_\_\_

  
**JERRY L. DELOACH**  
DEPUTY CITY ATTORNEY

## ADVERSE REPORT

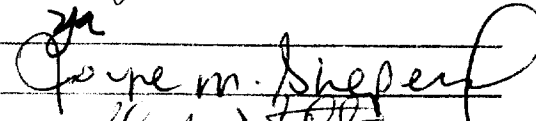
PUBLIC SAFETY &


LEGAL ADMINISTRATION COMMITTEE

DATE: 1/12/10

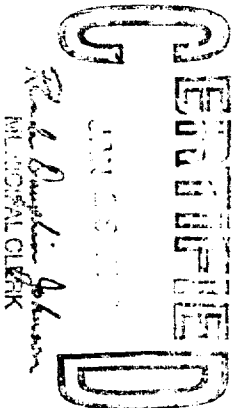
CHAIR: \_\_\_\_\_

  
\_\_\_\_\_

  
\_\_\_\_\_

  
\_\_\_\_\_

JAN 19 2010



JAN 19 2010

ADVERSED BY  
COUNCIL

CITY COUNCIL  
ATLANTA, GEORGIA

January 29, 2010

Mr. Timothy K. Brayboy  
10175 Hemlock Way  
Jonesboro, Georgia 30238

**10-R-0104**

Dear **Mr. Brayboy**

I sincerely regret that you have been adversely affected by the circumstances raised in your claim for damages against the City of Atlanta. Your time and patience in this matter has been greatly appreciated.

However, I must notify you that the Atlanta City Council Adopted an Adverse Report on your claim at its regular meeting on January 19, 2010. In consultation with the City's Law Department, who conducted an investigation of the situation, the Council has determined that the City cannot accept responsibility for this matter and therefore cannot pay this claim.

If you desire any further information, please contact the **City Attorney's Office/Claims Division at (404) 330-6400.**

Sincerely,

A handwritten signature in black ink that reads "Rhonda Dauphin Johnson". The signature is written in a cursive, flowing style.

Rhonda Dauphin Johnson, CMC  
Municipal Clerk

**cc: Claims Division/Law Department**

**DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY**

Claim No. 09L0840

Date: November 24, 2009

Claimant /Victim TIMOTHY K. BRAYBOY

BY:(Atty)(Ins.Co.)

Address: 10175 Hemlock Way Jonesboro, Georgia 30238

Subrogation:            Claim for Property damage \$ 1,719.75 Bodily Injury \$           

Date of Notice: 10/28/09 Method: Written, proper X Improper           

Conforms to Notice: O.C.G.A. §36-33-5 X Ante Litem (6 Mo.) X

Date of Occurrence 05/21/09 Place: 651 14<sup>th</sup> Street, NW

Department Watershed Management Bureau: Drinking Water Office:           

Employee involved            Disciplinary Action:           

**NATURE OF CLAIM:** The claimant alleges that he sustained damages as a result of an automobile accident involving a city vehicle in a parking lot at 651 14<sup>th</sup> Street. However, an investigation determined that there is no evidence to prove allegations made by the claimant in the claim.

**INVESTIGATION:**

Statements: City employee            Claimant X Others            Written            Oral           

Pictures X Diagrams            Reports: Police X Dept Report X Other           

Traffic citations issued: City Driver            Claimant Driver           

Citation disposition: City Driver            Claimant Driver           

**BASIS OF RECOMMENDATION:**

Function: Governmental            Ministerial X

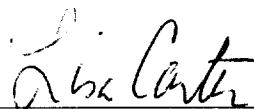
Improper Notice            More than Six Months            Other X Damages reasonable           

City not involved            Offer rejected            Compromise settlement           

Repair/replacement by Ins. Co.            Repair/replacement by City Forces           

Claimant Negligent            City Negligent            Joint            Claim Abandoned           

Respectfully submitted,



**INVESTIGATOR - LISA CARTER**

**RECOMMENDATION:**

Pay \$            Adverse X Account charged: General Fund            Water & Sewer X Aviation           

Claims Manager:  Concur/date 12/15/09

Committee Action:            Council Action

To: 4048728594

From: "Kelly, Angelena"

18/09/09 10:22 AM

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COUNCIL OF THE CITY OF ATLANTA  
MUNICIPAL CLERK  
City Hall  
55 Trinity Avenue, SW  
Atlanta, Georgia 30303

RE: CLAIM FOR DAMAGES

Today's Date: 10/13/09

ENTERED - 10-29-09 - SB  
09L0840 - L. CARTER

Dear Municipal Clerk:

This is to notify the City of Atlanta that I have suffered damages in the amount of \$ \_\_\_\_\_ properly and/or \$ \_\_\_\_\_ bodily injury for which I contend the City is liable.

1. Date of incident: 05/21/09 2. Time of incident: UNKNOWN 3. Police called: NO
4. Location of incident (including street address): 651 14TH ST NW
5. Name of your insurance company: Ga Farm Bureau Policy No. \_\_\_\_\_
6. State what and how incident occurred: Stated on the evening of 21 May 2009, I arrived at home and discovered the damage to the left rear of my vehicle quarter panel area of my 2002 Lexus ES300
7. ALL ESTIMATES AND DAMAGES ARE SUBJECT TO INSPECTION. THE MAKING OF FALSE CLAIMS WILL RESULT IN YOUR CLAIM BEING DENIED AND MAY RESULT IN CRIMINAL PROSECUTION!
8. The registered owner must make the claim for vehicle damages, complete the following and attach two (2) estimates of repair and proof of ownership of your vehicle.  
Your vehicle: LEXUS ES 300 Timothy K. Brayboy  
(Make) (Year) (Tag Number) (Driver's Name)  
City vehicle: UNKNOWN  
(Make) (City Driver's Name) (Department/Bureau)  
9. Witness: NONE
10. The acknowledgement of this claim in no way waives the Sovereign immunity of the City of Atlanta, as granted by State law, nor is it an admission of liability on behalf of the City of Atlanta and/or its employee(s).
11. Claims must be received within 6 months from the date of the event.

I HEREBY SWEAR OR AFFIRM THAT THE  
ABOVE INFORMATION IS TRUE AND  
CORRECT.

Signature of Claimant

Timothy K. Brayboy  
(Print Claimant's Name)

10175 Hemlock WAY  
(Address)

Jonesboro, Ga 30238  
(City, State and Zip Code)

770-294-3274/770-473-7489  
(Work Number) (Home Number)

10- R -0104

RCS# 17  
1/19/10  
1:54 PM

Atlanta City Council

REGULAR SESSION

CONSENT I

10-R-0145

ADOPT EXCEPT

YEAS: 14  
NAYS: 0  
ABSTENTIONS: 0  
NOT VOTING: 1  
EXCUSED: 0  
ABSENT 1

Y Smith	Y Archibong	Y Moore	Y Bond
Y Hall	Y Wan	Y Martin	Y Watson
Y Young	Y Shook	Y Bottoms	Y Willis
B Winslow	Y Adrean	Y Sheperd	NV Mitchell

CONSENT I